



The Long Term Care Coordinating Council
Wednesday, December 10
10:00-11:30 am
Child and Family
Main Conference Room
1268 Eddy St.
Providence, RI

DRAFT MINUTES

Kathleen Heren Bonnie Sekeres Mia Flurio Robin Etchingham Jenn Crosbie Kathleen Dalton Thomas Marcelo Holly Garvey Jim Nyberg Mike Walker Susan Pomfret Ken Pariseau Brooke Havens Maria Barros Craig Stenning Linda Katz	Sally Hay Randi Belhumeur Marjorie Waters Donna McGowan George Sousa Amanda Clarke Nancy Silva Bill Flynn Miriam Ricardo Jodi Glass Kathleen Kelly Katie Enright Maureen Maigret Carolyn Walsh Nicholas Oliver Laura Jones	Dianna Shaw Mary Lou Moran Kathleen Harrington Don Anderson Deanna Casey Michelle Szylin Judy Davis Rick Gamache Virginia Burke Sandra Powell Paula Parker Lisa Ponterelli Joan Kwiatkowski Ray Rusin Marea Tumber Lt. Governor Roberts
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I. Welcome

II. Approval of minutes from November 12

The minutes were circulated via email and they are posted on the SOS website. The minutes are also available here in hard copy. Sally Hay made a correction to the minutes: SAGE owns a copy of Gen Silent, and she is the contact person for anyone who would like to borrow the DVD for a showing.

III. Nursing Home Update

Ray Rusin (Chief, Office of Facilities Regulation (OFR) & Director, Radiation Control Program at DOH) gave an update on nursing homes.

Month	State/Federal Inspection	Standard	Follow-up	Complaint	SQC ¹
April	state	8	6	11	0
April	federal	1	-	-	1
May	state	9	5	6	1
June	state	8	6	22	0
July	state	4	6	22	0
August	state	4	4	17	0
September	state	1	7	21	2
October	state	11	6 ²	12	0
November	state	6	3 ³	5	0

¹ Substandard Quality of Care as defined in federal statute and regulations

² October - 4 Desk audits

³ November - 3 Desk audits

Pine Grove Health Center received two unannounced inspections in October; the first to confirm the facilities credible allegation of compliance that the immediate jeopardy situation was corrected based on the 9/11/14 survey, and an unannounced abbreviated complaint inspection. Pine Grove Health Center submitted a request for an informal dispute review (IDR). The Department conducted a desk IDR review and determined to remove several citations and edit others, the result of which impacted the scope and severity of the remaining citations below the level of immediate jeopardy and/or substandard quality of care (SQC). Subsequently, the designation of SQC is rescinded. Pine Grove Health Center will no longer require SQC monitoring. The OFR is currently monitoring three facilities for previous citations of SQC and November.

North Bay Retirement Living received an unannounced inspection in October and Department staff confirmed the facilities credible allegation of compliance to the immediate jeopardy situation identified during the 9/16/14 inspection was corrected. The Office of Facilities Regulation (OFR) is currently monitoring two additional facilities for previous citations of SQC. No SQC monitoring visits were conducted at Charlesgate or Elmhurst Extended Care in Providence during the months of October and November.

IV. Subcommittees Review

a. LGBT Elder Care

The Lt. Governor stated that the LGBT Elder Care Subcommittee was created within the structure of the LTCCC to address the specific needs of the LGBT community. In recognition of this underserved population and the growing need for services available to them, the LGBT Elder Care Subcommittee has spent much of the past year talking with mainstream providers, community partners, policy makers and LGBT older adults in Rhode Island. This

Strategic Plan is the result of those discussions and offers a dynamic framework for creating an environment that is welcoming and supportive of older LGBT people in Rhode Island. The group created action items in the Plan so that people can age healthfully. This is a civil rights issue for LGBT elders, and these issues are not necessarily obvious to younger generations. It is important for everyone to see Gen Silent.

Sally Hay (SAGE) presented the final version of the RI State Plan for LGBT Elder Care (attached).

The mission and vision is that people can thrive and not just live. The number of LGBT elders is expected to increase dramatically in the coming years. The Plan was a year in the making, and the result of many discussions. There are 4 goal areas: 1) to engage/empower LGBT individuals and allies. They are entitled to respect and should be able to live more openly. Strategies include developing resources, such as a buddy system and exploring a friendly visitor program; 2) to connect community resources in the private, nonprofit and public sectors; 3) to mobilize healthcare and LTC delivery systems and facilitate training at levels of organizations; and 4) to create more housing options for LGBT elders.

The Workgroup is brainstorming about possible organizations to partner with moving forward. The work should stay connected to the Council, but it needs strong community partners who might be able to keep moving in the community. If your organization might be a good fit, please let Sally know.

The Lt. Governor thanked Sally and SAGE for all of their great energy and support in developing the Plan. The goal is to create a community-based resource. The group's "home" provides staff support and helps to keep projects moving forward. The Lt. Governor had just come from the Oral Health Commission meeting, and said that group started with about 20 people who were interested in helping kids and today there were 65 people in the room. Donna McGowan mentioned the successful partnership between SAGE and the Alzheimer's Association. Craig Stenning (BHDDH) offered staff support for mentorship, particularly with housing issues.

b. Alzheimer's State Plan Full Commission

Lt. Governor Roberts gave an overview of the Alzheimer's State Plan (ASP). The process to develop the RI State Plan for Alzheimer's Disease and Related Disorders (ADRD) began in the spring of 2012 as a collaborative effort between the RI chapter of the Alzheimer's Association, DEA and the Lt. Governor's office. The work on the ASP officially began upon passage by the RI General Assembly of a Joint Resolution directing the LTCCC to serve as the organizational structure for a work group to lead the process. The ASP contains recommendations for specific steps for improvement in ADRD resources.

Donna McGowan (Executive Director of the RI Alzheimer's Association) gave an overview of the December 2 Alzheimer's Full Commission meeting. The minutes from this meeting are posted on the Secretary of State's Website.

- **Caregiver Task Force (Kathy McKeon, Chair):** This Task Force aims to assist caregivers of people with ADRD. They are addressing recommendations in the ASP including: resources and networking, engagement, respite care, respite care training and education, caregivers in the workplace and additional caregiver needs. The development of a Safe Driving brochure was a recommendation in the ASP. A student from RWU Law School helped to develop the content.
- **Professional Workforce Task Force (Rick Gamache, Chair)**
This Task Force is focused developing an ADRD-capable workforce is a critical building block for many other pieces of the overall ASP. The group is examining current statutes and regulations in RI and comparing them to other states to see where gaps might exist. The goal is to have providers and facilities to have standardized training and requirements in order to promote best practices. The group has 4 Subgroups that are examining: 1) training for all levels of health care workers and administrators; 2) consistent screening instruments by health care providers to provide accurate diagnoses; 3) activities specifically geared towards individuals with ADRD; and 4) physical design/guidelines for a program's physical environment, i.e. anti-wandering methods and the use of physical design to promote a therapeutic environment
- **Cultural Competency Task Force (Maria Barros, Chair)**
This Task Force was formed to address cultural competency issues in all sections of the ASP. The group developed a survey to assess the healthcare needs of different cultural groups in the community. The findings were similar to issues raised in LTCCC and ICI-CAC meetings: the primary gaps are transportation and communication issues with health care providers. The goals moving forward are developing a resource directory, finding a more culturally sensitive mini-mental assessment tool, bringing more voices to the table, developing a video library for caregivers in multiple languages and increasing access to medically trained translators.
- **Research Conference Task Force (Peter Snyder, Chair)**
The group is partnering with the Alzheimer's Association and their Caregiver Journey Conference The Caregiver Conference is in its fifth year, and will feature 21 breakout sessions. The joint conference is on March 5 at Crowne Plaza in Warwick, and is free to caregivers. The research conference has \$10,000 in funding: \$5000 from Tom Ryan and \$5000 from DEA. The conference will include: a juried poster board session and awards, AM and PM Breakout sessions, CMEs/CEUs for health professionals and an evening wine and cheese reception. Sid O'Bryant, who is a leader in blood-based biomarker research, will be the opening and keynote Speaker.
- **Website Task Force**
URI will be the host of the website, and they are in the process of hiring an IT person to design and manage the website. The task force will become the decision makers for content and aesthetics of the website.

The Lt. Governor said that this is an area with a lot of momentum. ADRD Issue that's growing in importance. The goal is to make people's lives better after an ADRD diagnosis. Bringing the Caregiver and Research Conferences together is novel and hopefully everyone benefits. Peter Snyder said he's more likely to see colleagues from RI at national conference, so having a local conference will really help RI Alzheimer's professionals connect with one another.

V. Introductions

- a. Lt. Governor-elect Daniel McKee
- b. LTCCC participants

Lt. Governor Roberts introduced Lt. Governor-elect Daniel McKee. Lt. Governor Roberts has worked with Lieutenant Governor-elect McKee in EMAC, and noted that elected officials bring their individual skills to the office. Lt. Governor-elect McKee will be the Chair of three Councils, including the LTCCC. Lt. Governor-elect McKee said that Lt. Governor Roberts will be a tough act to follow, and will take her up on the offer to stay in touch. Lt. Governor-elect McKee said that he is looking forward to working with everyone in the LTCCC, and that he did not anticipate making changes to the Council. The LTCCC participants introduced themselves to Lt. Governor-elect McKee.

VI. Transportation Update

George Sousa (LogistiCare) and Robin Etchingham (EOHHS) gave an update on the non-emergency transportation data from November.

LogistiCare is making a transition in the way it distributes bus passes. In the past, the passes were available at markets and now they are mailed directly from LogistiCare. Robin discussed the transition and she said that overall it is going smoothly, but there was some confusion in the first week. People that are part of RI Works get a monthly pass, while people on Medicaid call LogistiCare directly when they have medical appointments and get an appropriate number of passes for those visits. EOHHS has oversight over this program and they have bi-weekly meetings with LogistiCare and speak with them by phone frequently. Kathy Heren reminded everyone that there is a transportation meeting on the last Wednesday of each month at the Alliance for Better Long-Term Health. The next meeting is December 17 at 10:30am. Please email her (kheren@alliancebltc.org) for more information. George said that about a dozen facilities, mostly methadone clinics, receive bus passes for their clients. LogistiCare is trying to expand the number of places where people can pick up passes.

Statistics: In November there were 106,765 trips, which is an average of 440 per day. LogistiCare had the highest number of complaints ever at 1050. The increase is mostly due to rider no-shows (@ 560). The provider is assigned the trip, but when they arrive no one is home or the rider refuses the trip. The provider then files the complaint because they do not get paid when there is a no-show. The other two categories of complaints are late

pickups (@ 188) and provider no-shows (@ 206). The number of No Vehicle Available (NVA) increased from 22 last month to 91. LogistiCare terminated 2 providers due to safety concerns and non-compliance. One provider was suspended for two weeks and is now back.

LogistiCare continues to expand the number of providers. They now have 49 providers under contract: 6 ambulance companies, 5 medical transportation companies, 10 taxi companies, 27 private motor vehicles (PMVs) and RIPTA. Best Transit is coming on board on December 15, 2014 in South Kingston where is a great need for services. They will provide coverage for ambulatory only at first, and may provide a wheelchair van in the future. The Center for Treatment and Recovery is in the beginning stages of licensing for LogistiCare. They still need to go through PUC to get a license.

The Lt. Governor said that she met with DPUC recently. She said that RI needs legislation passed so that if an organization is requesting to be a provider and is licensed by another state facility, then DPUC can accept those licenses. The organization would only have to worry about the uncovered aspects of that license, such as obtaining driver licenses. PACE has been waiting 10 months for approval. George said that we could model the statute after another state because we need this change to happen.

They will be having another training in January. There are 12-15 providers who missed the last training, and LogistiCare will add another module of training for everyone. George wants to identify specific facility's needs and customize the training around what they need and want. This would be in addition to the core curriculum. LogistiCare will start doing assessments after the January training to assess retention of the material. Trainings will be held quarterly.

Paula Parker asked about the status of the capacity for wheelchair. George said the need has been there since day 1. Ford doesn't make the van chassis anymore, so now it's Nissan or Sprinter, which is made by Mercedes and very expensive. Paula asked if there are local companies that have the correct vehicles and whether PUC could fast-track them. The Lt. Governor asked if there are agencies or facilities that have excess capacity at certain times of the day. If so, perhaps the scheduling could be done differently, rather than investing in new vehicles. Bonnie Sekeres asked if wheelchair vehicles are assigned by need, and George confirmed that they are assigned by need within a region.

Nicholas Oliver asked for an update on the status of NEMT on Aquidneck Island. George said that First Transit came in with 12 ambulatory vehicles, and he hopes that they will take over Aquidneck Island. Jim Nyberg said that quarterly training is a great idea, and wondered if the training can be adapted so that new hires get trained on the first day of work. He also suggested that the training include again issues, not just logistics. George said that new drivers have to pass federal CTAA training that includes a 3-hour in-service on wheelchair securement and sensitivity training. LogistiCare wants to build on the on the sensitivity piece in the additional training module. LogistiCare wants to customize the training so that an EMT doesn't have to go to wheelchair securement training, since they are already working at a higher level.

Linda Katz asked if there was a relationship between the no-show and late numbers. If a provider has multiple trips and gets delayed waiting for a rider, the driver may be late for the next trip. George said he will run another report for the next meeting. There are many no-shows at adult day centers because if a client is sick, LogistiCare doesn't know and goes anyway. There are some people who abuse the system as well, but often it's just a miscommunication. Sandra Powell asked about the issue of consumers not being able to easily identify their rides. George said that this issue has been resolved by the use of handheld signs to identify drivers. George keeps track of training needs, and goes to provider if necessary.

Maureen Maigret said that she had spoken to Marjorie Waters from RIOP, and that the ADA riders got priority in rides and this was causing a lot of other riders to be late. George said this is an issue because he doesn't oversee the ADA aspects of RIDE, but RIDE is a common vendor to both and affects his trips. Robin said that she is working on this problem with RIPTA.

VII. Public Comment

The ICI- CAC meeting that was scheduled for December 18 is being moved to January. Lt. Governor Roberts is the Chair of the ICI-CAC, and she will need to look at the context moving forward. There is nothing so pressing that the Subcommittee can't wait until January.

- Kathleen Kelly announced that RIALA is sponsoring "Alive Inside" on December 10 at 6:00pm at the Warwick Mall.
- Kathy Heren announced an open house at the Alliance on December 12 at 6:00pm to collect health and beauty items for the Ronald McDonald House.
- Maureen Maigret announced the Aging in Community Act Subcommittee is meeting December 17, 2:00-3:00pm. The focus is on elder nutrition services.
- The ICI Fact sheet distribution is planned, and Maureen asked people to distribute the fact sheets where duals may be likely to access them.
- Ray Rusin said that there will be a hearing in January for Assisted Living Draft Regulations regarding women's health services. Also, there will be hearings for completely new hospital licensing regulations.
- Virginia Burke said that RIHCA is having a fundraiser for Doctors Without Borders. There are many Liberians working in nursing homes and other facilities in maintenance, housekeeping, etc., and many are refugees. RIHCA will match donations up to \$5,000.
- Maria Barros said that Nursing Placement is looking for donations to help the victims of the November 23 Cape Verde volcano that destroyed 3 towns.
- The Lt. Governor looks forward to working with LTCCC participants in the future, and she thanked everyone for their past work. She learned so much through the LTCCC, and that knowledge will serve her well as Secretary. She also wished Lt. Governor-elect McKee well in his new role.

VIII. Next Meeting: TBD